

## CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

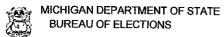
COVER PAGE	i, ,	
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement of	overs From: 11/25/08 to 12/31/09
1. Committee I.D. Number	4. Candidate Last	, , <u>, , , , , , , , , , , , , , , , , </u>
14074	HICKNER	THOMAS L.
2. Committee Name		icluding District # or Community Served (If applicable)
TOM HICKNER FOR COUNTY EXECUTIVE	COUNTYE	· weak
	4b. County of Reside	
5. Committee's Mailing Address	6. Treasurer's Name	e & Residential Address
TOM HICKNER	KEN GRZEG	ORCZYK
PO BOX 403	2889 QUEEN	I ANNES CT
BAY CITY MI 48707-0403	BAY CITY MI	48708
Area Code and Phone (989) 667-4125  If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone	(000) 004 4005
7. Treasurer's Business Address	8. Designated Reco	ord keeper's Name and Mailing Address (If the committee has a keeper)
J & K INCOME TAX SERVICE		• •
1604 22ND ST	MARIE A HA	
BAY CITY MI 48708	114 N SHERI	M05544
B) (1 G) (1 W) (0) (0)	BAY CITY MI	48708
(080) 802-2563		(000) 000 0000
Area Code and Phone (989) 892-2563	Area Code and Pho	ne (989) 892-3986
9. TYPE OF STATEMENT		
9a. Pre-Election OR 9b. Post	Election 9	c. Annual Statement ( 2009 Coverage Year)
Pre-Election or Post-Election Statement relates to:	90	d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
Primary	eral 96	e. Dissolution of Candidate Committee
Convention	pol	Effective Date of Dissolution
Special	aus	
Date of Election, Convention or Caucus	l By	y checking this item, I/We certify that the committee has no assets or utstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for
	. No	e Reporting Waiver. ote: The disposition of residual funds must be reported on Schedule 3 and the Summary Page.
A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, exper If any of the information listed in items 2, 4, 5, 6, 7, or 8 has change amendment to the Statement of Organization should accompany the before the filing deadline of a required campaign statement, the	quired Campaign State	ements. The Campaign Statements must include all applicable
10. Verification: I/We certify that all reasonable diligence was used i my/our knowledge and belief the contents are true, accurate and co	the proparation of th	
Current Treasurer or MARIE A HAYES	Marie	1 day 1 25-221
*Designated Record keeper	Signature	Date /- 25 2010
Candidate THOMAS L HICKNER	MILL	1-28-2010
Type or Print Name	Signature	Date / Duto

1. Committee I.D. Number 14074

## SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Tom Hickner for County Executive

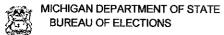
CANDIDATE COMMITTEE	2. Committee Name Torri Frick let 10	- County Excounte
RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 5,505.00	_
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$5,505.00	(18.) <b>\$</b> \$5,505.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$5,505.00	(20.) \$ \$5,505.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$1,849.76	(21.) \$ \$1,849.76
7. In-Kind Expenditures (Schedule 1B-lK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$2,675.46	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$2,675.46	(23.) \$ \$2,675.46
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$2,513.56	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		20 540 50
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$ \$2,513.56	(24.) \$ \$2,513.56
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _\$0.00	ŝ
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
	BALANCE STATEMENT	
Ending Balance of last report filed     (Enter zero if no previous reports have been filed.)	(13.) \$ \$3,277.16	<del>_</del>
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$5,505.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$8,782.16	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ \$5,189.02	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$3,593.14	*



## CANDIDATE COMMITTEE

1. Committee I.D. Number 14074

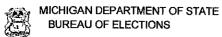
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.  3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/02/09	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
GARY & BARB ADELMAN 7367 GLEN EAGLE DR	 <sub>s</sub> 25.00	
BAY CITY MI 48706  5. If over \$100.00 cumulative, please provide:	§ 20.00	\$
	Click Here f	or Memo Itemization
Occupation Employer		
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/10/09 Name & Address	_	
WM & JEANNE ALLSOPP 1956 CARTER RIDGE CT AUBURN MI 48611	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address:		
CARMELL ANDERSON & JAMES HOPPENJAN 1317 18TH ST BAY CITY MI 48708	<sub>\$</sub> 40.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address		
GEORGINA AUER 204 PARK AVE BAY CITY MI 48708	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
Page Subtota	\$105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	<b>V.00.00</b>	
Pageof_38_	line 3a of Summary	



#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

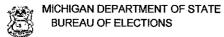
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/02/09  Name & Address:		
GEORGE & SANDRA AUGUSTYNIAK 2840 KAISER RD RT 1 PINCONNING MI 48650 5. If over \$100.00 cumulative, please provide:	<sub>\$</sub> 20.00	\$
OccupationEmployer	Click Here for	or Memo Itemization
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address		
WM BARTLETT 807 HOLLYBROOK DR MIDLAND MI 48642	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:   Loan from a person   Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/11/09  Name & Address:		
MARK & DEANNE BERGER 2235 CARROLL RD BAY CITY MI 48708	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address		
WM & LAURIE BERNER 271 DONOHUE BCH BAY CITY MI 48706	<sub>\$</sub> 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	Olick Here for	Memo temzaton
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
	\$160.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)  Page 2 of 38	Enter this total on line 3a of Summary Page.	



## CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/03/09  Name & Address:		r date or receipt)
KAREN TIGHE & TOM BOCK	•	
2123 CENTER AVE	F0 00	
BAY CITY MI 48708	<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Hore &	on Maria Manda di
Occupation Employer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/02/09  Name & Address		
TOM & MARYANN BORKOWSKI	_	
1913 19TH ST	<sub>\$</sub> 30.00	\$
BAY CITY MI 48708		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:    Loan from a person    Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/06/09  Name & Address:		
TIM & BETH BOUTELL		
855 S LINWOOD BCH RD	<sub>\$</sub> 50.00	\$
LINWOOD MI 48634		¥
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/01/09 Name & Address		
CHARLES & JAN BROWN		
5625 W SPRING KNOLL DR	<sub>s</sub> 25.00	¢
BAY CITY MI 48706  5. If over \$100.00 cumulative, please provide:		Ψ
3. Il over \$100.00 cumulative, please provide.	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:  Direct Loan from a person  Fund Raiser		
Page Subtotal	\$155.00	
Grand Total of All Schedules 1A	·	•
(Complete on last page of Schedule)	Enter this total on	j
Page 3 of 38	line 3a of Summary Page.	

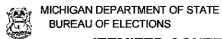


## CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:		
MIKE & SANDRA BUDA		
526 HANDY DR	20.00	
BAY CITY MI 48706	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Horo f	or Memo Itemization
Occupation Employer	Click nere i	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/11/09  Name & Address		
CHRISTINE CHESNY		
1800 CENTER AVE BAY CITY MI 48708	<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/06/09  Name & Address:		
ELIZA CORTEZ 1101 S JEFFERSON ST BAY CITY MI 48708	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/03/09  Name & Address		
MIKE & DIANE DALTON 116 VAIL CR MIDLAND MI 48640	<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution:		
Page Subtotal	\$140.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	-]

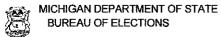
Page 4 of 38



## CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first na middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:		
JOHN DEJOHN		
300 PARK AVE	<sub>s</sub> 50.00	•
BAY CITY MI 48708	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Employer		
Business Address	_	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/02/09  Name & Address		
REV ROBERT DELAND	00.00	
712 COLUMBUS AVE	<sub>\$</sub> _20.00	\$
BAY CITY MI 48708		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address	_	
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address:		
CORINN LAFAVE-DENAY 1865 E SALZBURG RD	<sub>\$</sub> 40.00	\$
BAY CITY MI 48706	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:	Olick Here to	Weno itemzation
Occupation Employer	<del></del>	
Business Address	_	
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/02/09 Name & Address		
GERALD & MARY DESLOOVER 3682 E MARCUS SAGINAW MI 48603	<sub>\$</sub> 100.00	\$
5. If over \$100.00 cumulative, please provide:		
	Click Here for	Memo Itemization
Occupation Employer		
Business Address	_	
Type of Contribution:  Direct Loan from a person  Fund Raiser		
Page St	ubtotal \$210.00	
Grand Total of All Schedul		-
(Complete on last page of Sch	edule)	_
Page 5 of 38	Enter this total on line 3a of Summary Page.	



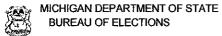
## **CANDIDATE COMMITTEE**

1. Committee I.D. Number 14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/11/09 Name & Address:  MARY DONNELLY 613 GREEN AVE BAY CITY MI 48708 5. If over \$100.00 cumulative, please provide:	<sub>\$</sub> 20.00	. \$
Occupation Employer	Click Here f	or Memo Itemization
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address		
FREDERICK & MARY DRYZGA 110 BOEHRINGER CT BAY CITY MI 48708	<sub>\$</sub> 50.00	_ \$
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:		
JEROME SOMALSKI & WANDA DZIWURA 1147 N PINE RD ESSEXVILLE MI 48732	\$ 30.00	. \$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address  Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/02/09  Name & Address		
JAMES FALVEY 2088 REPPUHN DR BAY CITY MI 48706	<sub>\$</sub> 15.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer	Official Field To	1 Wellio Rellization
Business Address		
Type of Contribution:		
		1
Page Subtotal	\$115.00	

Page 6 of 38

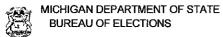
Enter this total on line 3a of Summary Page.



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_\_14074

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/09/90  Name & Address:  BARRY & NANCY FISCHER  2509 WHITEMORE  SAGINAW MI 48602	<sub>\$</sub> 20.00
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address	
WALT & MARTY FITZHUGH 3077 OAKWOOD CT BAY CITY MI 48706	<u>\$ 100.00                                </u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/02/09  Name & Address:	-
SUSAN GANSSER 1511 WOODMERE BAY CITY MI 48708	<u>\$ 20.00                                 </u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/03/09  Name & Address	
ED GLEDHILL 7387 THREE MILE RD BAY CITY MI 48706	§ 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	SHORT TOTO TO THORNO HOMEZUNOT
Business Address	
Type of Contribution:	
Page Subtota  Grand Total of All Schedules 1A (Complete on last page of Schedule)	3
Page_7of38′	Enter this total on line 3a of Summary Page.

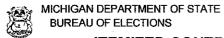


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_\_14074

2. Committee Name Tom Hickner for County Executive

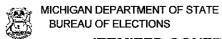
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:		
D E GOOD		
714 WEBB DR	00.00	
BAY CITY MI 48706	<sub>\$</sub> 20.00	<b>\$</b>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for -	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address		
STEPHEN & JEAN GOODNOW 1980 E HOTCHKISS RD BAY CITY MI 48706	<sub>\$</sub> 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/03/09  Name & Address:		
DAVID & ANNE GREGORY 2231 FRASER RD KAWKAWLIN MI 48631	<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser	····	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/04/09  Name & Address	<del></del>	
WM & MARIAN GREGORY 264 JENNISON PL BAY CITY MI 48706	<sub>§</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer	-	Weirio Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subto	otal \$190.00	
Grand Total of All Schedules (Complete on last page of Schedu	1	
Page 8 of 38	line 3a of Summary Page.	



#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	e, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/04/09  Name & Address:	
DONALD & WINIFRED GROBBEL 6333 GOLF LAKES BAY CITY MI 48706	<sub>\$</sub> 25.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	— Chick Here for Metrio Remization
Business Address	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address	
MIKE & IDA HALSTEAD 2157 6TH ST BAY CITY MI 48708	<u>\$</u> 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
OccupationEmployer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address:	
DONALD & RITA HARE 2920 BLUEBERRY PL SAGINAW MI 48603	<u>\$ 50.00</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address	<del></del>
DAN & NOREEN HATTON 1904 MOSHER ST BAY CITY MI 48706	\$ 30.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	_
Business Address	
Type of Contribution: V Direct Loan from a person V Fund Raiser	
Page Sub Grand Total of All Schedules (Complete on last page of Sched	s 1A dule)
Page 9 of 38	Enter this total on line 3a of Summary Page.

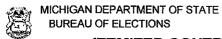


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/04/09  Name & Address:		date of rescripty
CHRISTOPHER HENNESSY & MEGHAN CHERRY 420 PINE ST CLIO MI 48420	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/11/09  Name & Address		
CHARLES & SUSAN HEWITT 403 HILL ST BAY CITY MI 48708	<sub>\$</sub> _20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: VDirect Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/09/09  Name & Address:		
STEPHEN & CAROL HICKNER 2760 LITTLEFIELD NE GRAND RAPIDS MI 49506	\$ 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address  Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/28/09  Name & Address	i	
KATHRYN HODGE 602 W INDIANA BAY CITY MI 48706	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization
Occupation Employer	Click Here loi	Memo temzaton
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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10 38	Enter this total on line 3a of Summary	

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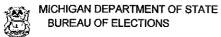
#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_14074

2. Committee Name Tom Hickner for County Executive

Enter contributor's name middle initial. Check box Committee (PAC) Repor	to indicate if cont	ribution is from a Politica	dividual, e al Commit	nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: JOHN HOWLANI 2110 16TH ST BAY CITY MI 48		YES 4. Date	of Receip	t <u>03/03/09</u>	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumu	lative, please pro	vide:				
Occupation		_ Employer			Click Here to	or Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a person	<b>✓</b>	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date	of Receipt	03/06/09		
HOWARD HURT 807 W COTTAGE LINWOOD MI 48	GROVE RI				<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumul	ative, please pro	vide:			Click Here fo	r Memo Itemization
Occupation		Employer				
Business Address	<b></b> .					
Type of Contribution:	Direct	Loan from a person	$\checkmark$	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date	of Receip	t 03/06/09		
RALPH ISACKSO 6325 GOLF LAKE BAY CITY MI 48' 5. If over \$100.00 cumul	ES CT 706	vide:			\$ 20.00 Click Here for	\$ Memo Itemization
Business Address						
Type of Contribution: 🗸	Direct	Loan from a person	<b>✓</b>	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date	of Receip	ot 03/12/09		
MIKE JANISKEE 5647 FIRETHORI BAY CITY MI 487					<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumul	ative, please pro	vide:			Click Hara for	Memo Itemization
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Business Address	<u></u> .					
Type of Contribution:	Direct	Loan from a person	✓	Fund Raiser		
				Page Subtotal	\$80.00	
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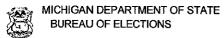


#### CANDIDATE COMMITTEE

1. Committee I.D. Number 14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/01/09  Name & Address:  RICHARD & MELISSA JANKE  272 JENNISON PL  BAY CITY MI 48708	_ _ 20.00	<b>¢</b>
5. If over \$100.00 cumulative, please provide:	Ψ	Ψ
Occupation Employer	Click Here for	or Memo Itemization
Business Address	•	
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/02/09  Name & Address	_	
MIKE & MARK KEGLEY 3372 E WOODLAND DR BAY CITY MI 48706	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/03/09  Name & Address:		
JIM KOSKI 2701 STARLITE DR SAGINAW MI 48603	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address  Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address	_	
ZIGMUND KOZICKI 4677 TOWNE CTR SAGINAW MI 48604	<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution:		
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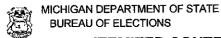


## **CANDIDATE COMMITTEE**

1. Committee i.D. Number \_\_\_\_\_14074

2. Committee Name Tom Hickner for County Executive

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address:	
Kurt & Wendy Legner 308 S Hampton St Bay City MI 48708	<sub>\$</sub> 50.00
5. If over \$100.00 cumulative, please provide:	OF ALLIeu C. S.
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/01/09  Name & Address	_
Gene & Lydia Lehnhardt 4870 Appletree Ln Bay City MI 48706	<u>\$40.00</u> <u>\$</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution:	
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/28/09  Name & Address:	
Kathleen Leikert / Robert Sexton Jr 3304 Evergreen Dr Bay City MI 48706	\$ 20.00 \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address  Type of Contribution:	
Talid Kaises	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address	_
James & Nancy Lewis 7292 Spring Lake Trail Saginaw MI 48603	<sub>\$</sub> 20.00
5. If over \$100.00 cumulative, please provide:	Olishallana fa sha a sa a sa
Occupation Employer	Click Here for Memo Itemization
Business Address	
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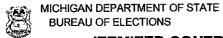


## **CANDIDATE COMMITTEE**

2. Committee Name \_

Tom Hickner for County Executive

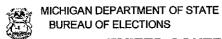
Enter contributor's name and address. If contribution is from an individual, enter last name, firs middle initial. Check box to indicate if contribution is from a Political Committee or an Independ Committee (PAC) Report all contributions regardless of amount.	t name, 6. Amount 7. Cumulative for lent Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:	-
Keith & Barbara Markstrom 1383 N Jones Essexville MI 48732 5. If over \$100.00 cumulative, please provide:	\$ 25.00 \$
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: V Direct Loan from a person V Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/10/09 Name & Address	
Patricia & Patrick Martin 1457 N Jones Rd Essexville MI 48732	<u>\$</u> 20.00 <u>\$</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	<del></del>
Type of Contribution:	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/03/09 Name & Address:	
Nancy McDonough 607 Nurmi Ct Bay City MI 48708 5. If over \$100.00 cumulative, please provide:	\$ 50.00 \$ Click Here for Memo Itemization
OccupationEmployer	
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/07/09  Name & Address	
AI & Joy McFadyen 2220 McKinley Bay City MI 48708	<sub>\$</sub> 50.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: V Direct Loan from a person V Fund Raiser	
Pa	ge Subtotal \$145.00
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Page 14 of 38	Enter this total on line 3a of Summary Page.



## CANDIDATE COMMITTEE

2. Committee Name Tom Hickner for County Executive

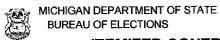
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/02/09 Name & Address:		
Eva Hickner McGee		
2387 Muirhead Dr	100.00	
Bay City MI 48706	<sub>\$</sub> 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Hora f	or Memo Itemization
Occupation Employer	Click Fiele i	or Werno Remization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		····
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/07/09  Name & Address		
Frederick & Mary Ann Meyer 5611 Meadow View Dr Bay City MI 48706	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fe	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/28/09  Name & Address:		
George & Patricia Middleton 4200 Richmark Ln	<sub>\$</sub> 20.00	<u> </u>
Bay City MI 48706  5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
OccupationEmployer		
Business Address  Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/09		
Name & Address		
Robert & Mary Miles	°30.00	
705 Park Ave	§ 30.00	<u> </u>
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
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Grand Total of All Schedules 1A (Complete on last page of Schedule)	<b>I</b>	
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#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/28/09 Name & Address:		
James & Sandra Miner 1025 Rosemary Ln Essexville MI 48732	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	CHOK HOLE IC	or Menio Renization
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address		
Robert & Debra Monroe 612 Green Ave Bay City Mt 48708	<sub>\$</sub> 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address:		
Gary Moore & Jan O'Leary 193 Hendrie Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	\$ 40.00 Click Here fo	\$r Memo Itemization
Occupation Employer		
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/06/09  Name & Address		
David & Vickie Murray 4301 Three Mile Rd Bay City MI 48706	<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Vicet Loan from a person Vicet Fund Raiser		
Page Subtotal	\$210.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 16 of 38	line 3a of Summary Page.	<i>'</i>

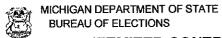


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	e, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/01/09 Name & Address:	
Donald Noble 222 Lagoon Bch Dr Bay City MI 48706	<u>\$ 50.00</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/01/09  Name & Address	
Leonard & Mary Norman 3395 Northway Dr Bay City MI 48706	<u>\$ 50.00</u> <u>\$</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution:	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:	
Richard & Tina Pabalis 5431 Christena Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	\$ 30.00 \$ Click Here for Memo Itemization
Fuding	
Business Address  Type of Contribution:	
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/01/09  Name & Address	
Jane Perkins 1106 Harbor Cove Bay City MI 48706	ş 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution:  Direct  Loan from a person  Fund Raiser	
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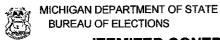
Page 17 of 38



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_14074

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/03/09  Name & Address:  Charles Pinkerton 1424 Straits Dr  Bay City MI 48706  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address Type of Contribution: V Direct   Loan from a person   V Fund Raiser	\$ 50.00 \$ Click Here for Memo Itemization	
Charles Pinkerton 1424 Straits Dr Bay City MI 48706  5. If over \$100.00 cumulative, please provide:  Occupation Employer		_
5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address	Click Here for Memo Itemization	
Business Address		
		ļ
Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/04/09  Name & Address		ļ
James & Constance Pitz 5601 Pondview Midland MI 48640	<sub>\$</sub> 50.00 <sub>\$</sub>	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization	
Occupation Employer		j
Business Address		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/04/09  Name & Address:	_	
Daniel Pletzke 107 Shady Shores Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	\$ 20.00 \$ Click Here for Memo Itemization	_
OccupationEmployer		
Business Address		
Type of Contribution: 🗸 Direct Loan from a person 🗸 Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address	-	
Keith & Gretchen Pretty 608 W Main St Midland MI 48640	<sub>\$</sub> 20.00	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization	
Occupation Employer		
Business Address		
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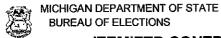


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Rec	ceipt	03/02/09		
Name & Address:  David Ramsey 805 Rhodes St PO Box 23 Pinconning MI 48650			<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:			Click Here fo	or Memo Itemization
Occupation Employer			<del>-</del>	
Business Address				
Type of Contribution: ✓ Direct Loan from a person	✓	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt? YES  Address	ceipt	03/02/09	<del></del>	
Brian Redmond 11 Bay Shore Dr Bay City MI 48706			<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:			Click Here fo	r Memo Itemization
Occupation Employer				
Business Address				
Type of Contribution:	✓	Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Re Name & Address:	eceip	03/12/09		
Robert & Lori Redmond 201 N Mountain St Bay City MI 48706 5. If over \$100.00 cumulative, please provide:			\$25.00 Click Here fo	\$r Memo Itemization
OccupationEmployer				
Business Address  Type of Contribution:   Direct  Loan from a person	<b>7</b>	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Roname & Address	eceip	ot 03/12/09		
Michael & Diane Regulski 3460 Fairway Dr Bay City MI 48706			<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:			Click Here fo	r Memo Itemization
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Business Address				
Type of Contribution:	✓	Fund Raiser		
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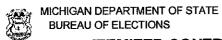
#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

2. Committee Name

Tom Hickner for County Executive

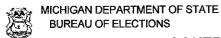
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:	<del></del> .	
Jim Reid 919 N Water St Bay City MI 48708	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address  Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/05/09 Name & Address		l
Michele Reilly 1701 Helen St Bay City MI 48708	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/01/09  Name & Address:		
Larry & Rebecca Reimann 803 Florida Ct Bay City MI 48706	<u>\$</u> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address		
Dave & Dolores Rogers 4659 Dale Ct Bay City MI 48706	<sub>\$</sub> 40.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Page 20 of 38	line 3a of Summary Page.	,



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/03/09 Name & Address:		
Brenda Rowley 191 Athlone Bch	00.00	
Bay City MI 48706	<sub>\$</sub> 20.00	. \$
5. If over \$100.00 cumulative, please provide:	0	
Occupation Employer	Click Here t	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address		
Bennett & Patti Ruby 2304 Vina Ct	<sub>\$</sub> 25.00	\$
Bay City MI 48708		
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/09/09  Name & Address:		
Donald & Angela Scherzer 5470 Four Mile Rd Bay City MI 48706	<sub>\$</sub> 50.00	_ \$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/02/09 Name & Address		
Thomas Schindler 261 E Townline Rd Auburn MI 48611	<sub>\$</sub> 20.00	. \$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$115.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 21 of 38	line 3a of Summar Page.	у

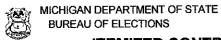


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/02/09		
Name & Address: Theodore Schumann 3339 Fairway Dr Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	<sub>\$</sub> 100.00	\$
	Click Here for	or Memo Itemization
•		
Business Address  Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address		
Joe & Joann Sheeran 1206 Wilderness Ct Essexville MI 48732	<sub>\$</sub> _50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:   Loan from a person   Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/12/09  Name & Address:		
Richard Sheppard 7175 S Block Rd Frankenmuth MI 48734 5. If over \$100.00 cumulative, please provide:	\$ 40.00 Click Here fo	ss_r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/04/90 Name & Address		
Dhana & Patricia Shrestha 2133 Heritage Dr Bay City MI 48706	<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer	Ollow Fiore IO	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota	\$240.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
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Page <u>22 of 38</u>



#### **CANDIDATE COMMITTEE**

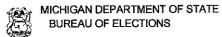
1. Committee I.D. Number \_\_\_\_\_\_14074

2. Committee Name

Tom Hickner for County Executive

Enter contributor's name and address. If contribution is from an individual, enter last name, fir middle initial. Check box to indicate if contribution is from a Political Committee or an Independent (PAC) Report all contributions regardless of amount.	rst name, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/05/09 Name & Address:  Lydia Solinski	
403 E Salzburg Rd Bay City MI 48706	<sub>\$</sub> 20.00
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	Click Here for Memo Itemization
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address	
Richard & Marilyn Somalski 1830 N SE Boutell Rd Essexville MI 48732	\$ 50.00 \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	<u></u>
Business Address	
Type of Contribution:	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:	
Michael Stodolak 1206 Fifth St	<u>\$ 50.00                                 </u>
Bay City MI 48708	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	
Business Address  Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address	
Douglas & Deborah Stone 1007 Park Ave	<sub>\$</sub> 20.00
Bay City MI 48708  5. If over \$100.00 cumulative, please provide:	
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	<del></del>
	age Subtotal \$140.00
Grand Total of All S	
(Complete on last page	
23 of 38	line 3a of Summary Page.

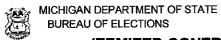
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#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

enter contributor's name and address. If contribution is from an individual, enter last name, lifst name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address:		<del></del>
Joel & Michelle Strasz. 417 Fillmore Pl Bay City MI 48708 5. If over \$100.00 cumulative, please provide:	\$ 20.00	\$r Memo Itemization
Occupation Employer	Click nere to	i Wellio Remization
Business Address  Type of Contribution:  Loan from a person  Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address		
Andrea Studders 215 Ames St Bay City MI 48708	<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/02/09  Name & Address:		
Fred & Pamela Todd 776 Maple Crest Dr Frankenmuth MI 48734	\$ 100.00 Click Here for	\$ Memo Itemization
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer  Business Address  Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/13/09 Name & Address		
Luann Witzke Travis 703 S Arbor St Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	<sub>\$</sub> 40.00	\$
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Page Subtotal	\$180.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	<del></del>	



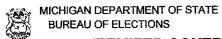
#### **CANDIDATE COMMITTEE**

14074 1. Committee I.D. Number \_

Tom Hickner for County Executive 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/01/09 Name & Address:		
Bob & Jeannie Traxler 1760 Van Wagoner Dr Saginaw MI 48638 5. If over \$100.00 cumulative, please provide:	\$ 50.00	\$or Memo Itemization
Occupation Employer	Click Here i	or Memo Remization
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address		
Frank & Anna Tymonski 16798 Brooklane Blvd Northville MI 48618	<sub>\$</sub> _100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/02/09  Name & Address:	•	
John & Constance Van Poppelen 3074 Oakwood Ct Bay City MI 48706	\$ 20.00	s Service Serv
5. If over \$100.00 cumulative, please provide:	Ollok Floro le	i Nostro Romazation
Occupation Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/04/09  Name & Address		
Dee Dee Wacksman 1605 Carla Dr Essexville MI 48732	<sub>\$</sub> 25.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
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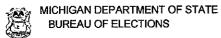


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/01/09  Name & Address:		
Wallace Warner 2575 N Orr Hemlock MI 48626 5. If over \$100.00 cumulative, please provide:	\$ 25.00	\$
Occupation Employer	Click Here to	or Memo Itemization
Business Address  Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	·	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address		
Terry & Peggy Watson 93 River Trail Dr Bay City MI 48706	<sub>\$</sub> 40.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/04/09 Name & Address:		
Howard & Julie Wetters 1866 Wetters Rd Kawkawlin MI 48631 5. If over \$100.00 cumulative, please provide:	\$ 50.00 Click Here fo	. \$ r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/05/09  Name & Address		
Doug Wirt 3405 Cortland Dr Bay City MI 48706	<sub>\$</sub> 100.00	. \$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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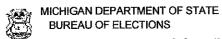


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first na middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/10/09 Name & Address:	
William & Carol Wright	
1513 Raymond St	10.00
Bay City MI 48706	<sub>\$</sub> 10.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	Click Here for Memo itemization
Business Address	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/03/09  Name & Address	<u> </u>
Stanley Yascolt	<sub>s</sub> 40.00
422 W Kitchen Rd	\$ 40.00 <b>\$</b>
Pinconning MI 48650	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	-
Business Address	···
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/19/09  Name & Address:	
	00.00
Jerry Cole 2309 Gysin Ct	<sub>\$</sub> 20.00
Bay City MI 48708	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	_
Type of Contribution:   Direct Loan from a person   Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/13/09 Name & Address	
John Grigg MD & Marilyn Grigg	
2421 Lakeview Meadows	<sub>s</sub> 20.00
Bay City MI 48706	Ψ
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	_
Type of Contribution: 🗸 Direct Loan from a person 📝 Fund Raiser	
Page S	Subtotal \$90.00
Grand Total of All Schedu	ales 1A
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27 of 38	line 3a of Summary Page

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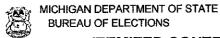


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

2. Committee Name Tom Hickner for County Executive

	ox to indicate if conf	ribut	bution is from an individual ion is from a Political Comr rdless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1  Name & Address:	PAC Receipt?		YES 4. Date of Reco	eipt	03/14/09		
Erland Kivisto							
1277 Cecelia Dr						<sub>s</sub> 20.00	
Essexville MI 48	3732					\$	\$
5. If over \$100.00 cum	ulative, please pro	vide	:			Click Here fo	or Memo Itemization
Occupation		_ [	Employer			Choic i joi o ic	
Business Address		<del></del>	-				
Type of Contribution:	✓ Direct		Loan from a person v		Fund Raiser		
Contribution #2     Name & Address	PAC Receipt?		YES 4. Date of Reco	eipt	03/12/09		<del></del>
Kenneth & Pegg 383 River Dr Bay City MI 487	-					\$ <u>50.00</u>	\$
5. If over \$100.00 cum		vide	:			Click Here fo	r Memo Itemization
Occupation		- En	nployer				
Business Address					<del></del>		
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
Contribution # 3     Name & Address:	PAC Receipt?	✓	YES 4. Date of Rec	eipt	03/09/90		
Plumbers & Stea	amfitters 85 P	AC	:			<sub>s</sub> 80.00	
6705 Weiss	no					Ψ	\$
Saginaw MI 486 5. If over \$100.00 cum		vida				Click Here for	Memo Itemization
·							
Occupation			.iiipidyei				
Business Address Type of Contribution:	Direct		Loan from a person	7	Fund Raiser		
3. Contribution # 4	PAC Receipt?		YES 4. Date of Re	ceip	ot 03/17/09	***************************************	
Name & Address							
Tim & Jane Quir 201 Lagoon Bch						<sub>s</sub> 100.00	
Bay City MI 487						\$ 100.00	\$
5. If over \$100.00 cum		vide	e:			05.11.	NAME OF STREET
Occupation		<del></del>	Employer			Click Here fol	Memo Itemization
Business Address							
Type of Contribution:	✓ Direct		Loan from a person	/	Fund Raiser		
				-	Page Subtotal	\$250.00	
					nd Total of All Schedules 1A		_
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28 of 38						line 3a of Summary Page.	



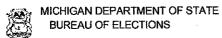
## **CANDIDATE COMMITTEE**

2. Committee Name

Tom Hickner for County Executive

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/16/09 Name & Address:		
Richard Spence 417 Mc Coskry St Saginaw MI 48601 5. If over \$100.00 cumulative, please provide:	\$ 50.00	\$
Occupation Employer	Click Here to	or Memo Itemization
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/16/09  Name & Address		
James Stoddard MD & Elizabeth Stoddard 2316 Nurmi Dr Bay City MI 48708	<sub>\$</sub> 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/17/09  Name & Address:		
Mark & Renee Van Poppelen 800 Wells Ct Bay City MI 48708	\$ 100.00	\$r Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click nere to	i Weno itemzation
Occupation Employer		
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/09 Name & Address		
Michael Gruber MD & Debra Gruber 108 Boehringer Ct Bay City MI 48708	<sub>\$</sub> 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
Page Subtota  Grand Total of All Schedules 1A  (Complete on last page of Schedule		
Page 29 of 38	Page.	

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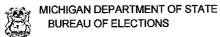


## CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from middle initial. Check box to indicate if contribution is from a Committee (PAC) Report all contributions regardless of amount of the contributions regardless of another contributions.	Political Committee or an Independent unt.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4 Name & Address:	. Date of Receipt 03/22/09	<del>_</del>	
John & Karen Jacobs 148 Little Killarney Bch Bay City MI 48706		<sub>\$</sub> 25.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here f	or Memo Itemization
Occupation Employer			
Business Address  Type of Contribution:	person		
	Date of Receipt 03/21/09	-	
Debra Keyes 810 Germania Ave Bay City MI 48706		<sub>\$</sub> 20.00	. \$
5. If over \$100.00 cumulative, please provide:		Click Here for	or Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution:	person 🚺 Fund Raiser		
Contribution # 3 PAC Receipt? YES  Name & Address:	4. Date of Receipt 03/19/09		
John & Jean Leaming 37 E Sharlear Dr Essexville MI 48732 5. If over \$100.00 cumulative, please provide:		\$ 50.00 Click Here fo	ss or Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: V Direct Loan from a	person 🗸 Fund Raiser		
Contribution # 4 PAC Receipt? YES  Name & Address	4. Date of Receipt <u>03/24/09</u>	_	
Phillip McKenna 235 E Main St Northville MI 48167		<sub>\$</sub> 50.00	_ \$
5. If over \$100.00 cumulative, please provide:		Click Here fo	or Memo Itemization
Occupation Employer			
Business Address	paring .		
Type of Contribution: 🗹 Direct Loan from a			
<b>2</b> 0	Page Subto Grand Total of All Schedules (Complete on last page of Schedu	Enter this total on line 3a of Summar	y
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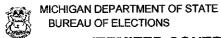
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#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/25/09  Name & Address:		
Louis & Karen Meyette 4115 Shannon Pl Bay City MI 48706	<sub>\$</sub> 25.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address  Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/27/09		
Name & Address		
Jan Miner 304 W Hampton Rd Essexville MI 48732	\$ 20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/21/09 Name & Address:		
Lynn & Sheila Stamiris 2203 Carroll Rd Bay City MI 48708	\$ 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: 🗸 Direct Loan from a person 🗸 Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/25/09  Name & Address		
Mitchell & Jeanette Singer 6734 Edinborough West Bloomfield MI 48322	<sub>\$</sub> 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: 🚺 Direct Loan from a person 📝 Fund Raiser		
Page Subtotal	\$195.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J
Page 31 of 38	line 3a of Summary Page.	

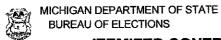


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last nam middle initial. Check box to indicate if contribution is from a Political Committee or an Inde Committee (PAC) Report all contributions regardless of amount.	ependent  6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/04/09  Name & Address:	9
Brent Goik	
3351 Parkway Dr	20.00
Bay City MI 48706	<sub>\$</sub> 20.00
5. If over \$100.00 cumulative, please provide:	Olista Hanne Standard aller
Occupation Employer	Click Here for Memo Itemization
Business Address  Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raise	3f
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/13/09 Name & Address	<u>)                                    </u>
John & Karen West	50.00
3314 Dearborn St	<sub>\$</sub> 50.00
Flint MI 48507	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	<del></del>
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Rais	ser
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/15/09 Name & Address:	9
Thomas M Kinney	<sub>s</sub> 50.00
1400 W Borton	\$ \$
Essexville MI 48732	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	CHOR FIGIO TO MOTHO ROTHER MOTH
OccupationEmployer	
Business Address	
Type of Contribution: V Direct Loan from a person V Fund Rai	
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/15/0 Name & Address	9
Kevin Stapish	50.00
14 W Sharlear Dr	<sub>\$</sub> 50.00
Essexville MI 48732	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	·
Type of Contribution: 🗸 Direct Loan from a person 🗸 Fund Rais	ser
	Page Subtotal \$170,00
Grand Total of	All Schedules 1A
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Page of 30



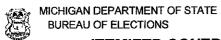
#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_

14074

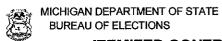
Enter contributor's name and address. If contribution i middle initial. Check box to indicate if contribution is fr Committee (PAC) Report <u>all</u> contributions regardless of	om a Political Committe	ter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES  Name & Address:	4. Date of Receipt	03/15/09		
John Aguilar 512 N Lincoln Bay City MI 48708 5. If over \$100.00 cumulative, please provide:			§ 20.00	\$
Occupation Employe	er		Click Here f	or Memo Itemization
Business Address  Type of Contribution:   Direct  Loan for	rom a person	Fund Raiser		
Contribution #2 PAC Receipt? YES  Name & Address	4. Date of Receipt	03/15/09		
Kurt Asbury 2125 Sixth St Bay City MI 48708			<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:			Click Here for	or Memo Itemization
Occupation Employer				
Business Address	·			
Type of Contribution:  Direct  Loan fr	om a person	Fund Raiser		
Contribution # 3 PAC Receipt? YES  Name & Address:	4. Date of Receip	t 03/15/09		
Juli Bollman 306 38th St Bay City MI 48708 5. If over \$100.00 cumulative, please provide:			\$ 20.00 Click Here fo	- \$or Memo Itemization
Occupation Employe	er			
Business Address				
	rom a person	Fund Raiser		
Contribution # 4 PAC Receipt? YES  Name & Address	4. Date of Recei	pt 03/15/09		
Bill Borch 2686 22nd St Bay City MI 48708			<sub>\$</sub> 20.00	\$
5. If over \$100.00 cumulative, please provide:			Click Here for	or Memo Itemization
OccupationEmp	loyer			
Business Address				
Type of Contribution: 🗹 Direct Loan	from a person	Fund Raiser	1	
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## CANDIDATE COMMITTEE

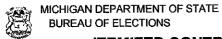
Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	e, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/15/09 Name & Address:	
Kim Coonan 706 Sidney	s 20.00 s
Bay City MI 48706	<u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	_
Business Address	
Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser	
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address	
Bill & Elaine Fournier 1020 N Water Bay City MI 48708	<u>\$</u> 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address:	
Dave Gill 306 W Vermont Bay City MI 48706	\$ 20.00 \$Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Olick Pictor for Morno Rottle addition
Occupation Employer	
Business Address	
Type of Contribution: 🗸 Direct Loan from a person 🗸 Fund Raiser	
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address	
Guy Greve 2300 Nurmi Dr Bay City MI 48708	<sub>\$</sub> 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	<u> </u>
Business Address	
Type of Contribution: 🚺 Direct Loan from a person 📝 Fund Raiser	
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Page 34 of 38	Enter this total on line 3a of Summary Page.



#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

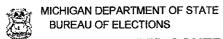
Enter contributor's name and address. If contribution is from an individual, enter last name, first na middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address:	
Gene & Carol Gwizdala 1305 S Monroe Bay City MI 48708	<u>\$</u> 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	<del></del>
Business Address  Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address	
Chuck Hewitt 403 Hill St Bay City MI 48708	<u>\$</u> 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	_
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address:	
Chris Izworski 547 River Dr Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	\$ 20.00 \$ Click Here for Memo Itemization
Occupation Employer	_
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address	
Nicholas Madaj 2492 Bala Dr Bay City MI 48708	<u>\$</u> 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	<u> </u>
Business Address	_
Type of Contribution: Direct Loan from a person Fund Raiser	
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Page 35 of 38	line 3a of Summary Page.



#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_14074

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/15/09 Name & Address:  Jeff Mayes		
4297 Zander Dr	<sub>s</sub> 20.00	•
Bay City MI 48706	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Employer		
Business Address  Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address		
Fred Murawski 2108 18th St	<u>\$</u> 10.00	\$
Bay City MI 48708	Click Horo fo	or Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Here it	or Metho Herriszanon
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address:		
Eric Musum 797 W Woodcock Rd	<sub>\$</sub> 20.00	. \$
Midland MI 48640	Olista I Inso fo	r Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Hele lo	I Mellio Iteliazation
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address	_	
Gary Phillips 1003 Fifth Bay City MI 48708	<sub>\$</sub> 20.00	. \$
5. If over \$100.00 cumulative, please provide:	Olista Mana fa	Manua Itamization
Occupation Employer	Click Here to	r Memo Itemization
Business Address		
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Grand Total of Ali Schedules 1A (Complete on last page of Schedule)	L	
Page 36 of 38	Enter this total on line 3a of Summar Page.	y



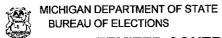
#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_14074

2. Committee Name

**Tom Hickner for County Executive** 

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Eac Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address:	_
Tom Putt 3837 Garfield Rd Auburn Mi 48611 5. If over \$100.00 cumulative, please provide:	\$ 20.00 \$ Click Here for Memo Itemization
Occupation Employer	Click Here for Memo itemization
Business Address	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address	_
Forrest Robison 1210 Hine Bay City MI 48708	<u>\$</u> 20.00 <u>\$</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/15/09 Name & Address:	
Jeff Sawyer 7677 Midland Rd Freeland Mi 48623	\$ 20.00 \$ Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Here for Memo itemization
Occupation Employer	
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/15/09  Name & Address	_
Dr. Gerald & Janet Schloff 112 Boehringer Ct. Bay City MI 48708	<sub>\$</sub> 40.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	_
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subto	otal \$100.00
Grand Total of All Schedules (Complete on last page of Schedules)	ule) Enter this total on
Page 37 of 38	line 3a of Summary Page.



#### **CANDIDATE COMMITTEE**

2. Committee Name

**Tom Hickner for County Executive** 

Enter contributor's name and address. If contribution is from an individual, enter last name, for middle initial. Check box to indicate if contribution is from a Political Committee or an Indepen Committee (PAC) Report <u>all</u> contributions regardless of amount.	dent   6. Amount   7. Cumulative for   Election Cycle for Each   Contributor (Through   date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 03/15/09 Name & Address:	
Brandon Short 4277 Westfield Bay City Mi 48706 5. If over \$100.00 cumulative, please provide:	\$ 20.00 \$
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution:	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/15/09 Name & Address	
Bob Super 205 Oakland Dr Essexville MI 48732	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Contribution # 3 PAC Receipt? YES 4. Date of Receipt  Name & Address:	
	\$ \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Contribution # 4 PAC Receipt? YES 4. Date of Receipt	
Name & Address	
	\$ e
	*
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Pa	age Subtotal \$40.00
Grand Total of All So (Complete on last page)	
Page 38 of 38	Enter this total on line 3a of Summary Page.



Page 1 of []

## **ITEMIZED IN-KIND CONTRIBUTIONS**

#### **SCHEDULE 1-IK**

1. Committee I. D. Number 14074

2 Committee Name Tom Hickner for County Executive

CANDIDATE COM	ALL COMMINGE NAME	Tourny Extoodity
Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address:  Tom Hickner 4821 E Westgate Bay City MI 48706  If over \$100.00 cumulative, please provide: Occupation: Bay County Executive Employer Name & Business Address: Bay County 515 Center Ave Bay City MI 48708  Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Christmas party staff & workers  5. Date Of Receipt: 01/30/09  6. Vendor Name & Address:	\$ 416.46 \$
Contribution #2 PAC Receipt? Yes Name & Address  Same	Goods or Services Purchased by Candidate or Others-LOAN	107.82 \$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:  Fund Raiser Contribution	Description Refreshments - Obama party volunteers  5. Date Of Receipt: 01/20/09  6. Vendor Name & Address:  Old City Hall 814 Saginaw St Bay City MI 48708	lick Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  Same	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 5 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN	0.00
Employer Name & Address:	Description Fundraiser  5. Date Of Receipt: 02/16/09  6. Vendor Name & Address:  Bay Arts Council  915 Washington Ave	ick Here for Memo Itemization
Fund Raiser Contribution	Bay City MI 48708	
	Page Subtota Grand Total of all Schedules 1-ll (Complete on last page of Schedule	(

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**SCHEDULE 1-IK** 

1. Committee I. D. Number 14074

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2. Committee Name Tom Hickner for County Executive

CANDIDATE COM	MITCE - COMMISSION -	
Name and Address from whom received if contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value  8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Same	4.	35.00 \$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:  Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others- LOAN  Description FUNDRAISER  5. Date Of Receipt: 05/01/09  6. Vendor Name & Address:  Pinconning Mayors Scholarship Fund  PO Box 556  Pinconning MI 48650	ck Here for Memo Itemization
Contribution #2 PAC Receipt? Yes Name & Address  Same	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	25.40
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Stamps  5. Date Of Receipt: 05/01/09  6. Vendor Name & Address:	
Fund Raiser Contribution	Postmaster Clie 1000 Washington Ave Bay City MI 48707	ck Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  Same	4. Endorsement or Guarantee of Bank Loan  Goods Donated or Loaned Services Donated \$ 1.  Goods or Services Purchased by Candidate or Others  Goods or Services Purchased by Candidate or Others-LOAN	87
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:  Fund Raiser Contribution	Description printing spring fling  5. Date Of Receipt: 05/01/09  6. Vendor Name & Address:	ck Here for Memo Itemization
	Page Subtotal	\$62.27
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**SCHEDULE 1-IK** 

1. Committee I. D. Number 140

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CANDIDATE COMM	I LE 2. Commune Name	
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or 8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? Yes Name & Address:  Same	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others  ✓ Goods or Services Purchased by Candidate or Others-LOAN	<sub>\$</sub> _100.00
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:  Fund Raiser Contribution	Description FUNDRAISER  5. Date Of Receipt: 05/01/09  6. Vendor Name & Address:  Bay Co Dem Party 2341 Beaver Rd Kawkawlin MI 48631	Click Here for Memo Itemization
Contribution # 2 PAC Receipt? Yes Name & Address  Same  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	Goods or Services Purchased by Candidate or Others  Goods or Services Purchased by Candidate or Others- LOA  Description Lunch Shore & Lipinski  Date Of Receipt: 04/09/09	\$ 30.60 \$
Fund Raiser Contribution	6. Vendor Name & Address: Atrium 1108 N Water St Bay City MI 48708	Click Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address:	Goods or Services Purchased by Candidate or Others  Goods or Services Purchased by Candidate or Others-LOA	50.00 <sub>\$</sub>
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description FUNDRAISER  5. Date Of Receipt: 05/22/09  6. Vendor Name & Address:  SBYC PO Box 45 Bay City MI 48707	Click Here for Memo Itemization
Fund Raiser Confribution	Page Sub	total \$180.60
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Page 3 of 11



**SCHEDULE 1-IK** 

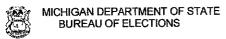
1. Committee I. D. Number 14074

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3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Same	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN	24.25 <sub>\$</sub>	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Description Coal plant hearing  5. Date Of Receipt: 04/15/09  6. Vendor Name & Address:	ck Here for Memo Iter	mization
Fund Raiser Contribution  Contribution # 2 PAC Receipt? Yes Name & Address  Same  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Refreshments - development group  5. Date Of Receipt: 06/18/09	21.00 \$	
Fund Raiser Contribution	6. Vendor Name & Address: Old City Hall 814 Saginaw St Bay City MI 48708	ck Here for Memo Ite	mization
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	18.56 <sub>\$_</sub>	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Staff dinner & refreshments  5. Date Of Receipt: 06/12/09  6. Vendor Name & Address:  Old City Hall 814 Saginaw St Bay City MI 48708	ck Here for Memo Ite	mization
Fund Raiser Contribution	Page Subtotal  Grand Total of all Schedules 1-li (Complete on last page of Schedule	( ( )	nary

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**SCHEDULE 1-IK** 

1. Committee I. D. Number 14074

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CANDIDATE COMIN		r
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	The state of the s
Name & Address:	Goods Donated or Loaned Services Donated	94.60 s
Same	Goods or Services Purchased by Candidate or Others	\$
	Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide:	<b>—</b>	EL COLONIA DE LA
Occupation:	Description Snacks & refreshments constituents	
Employer Name & Business Address:	5. Date Of Receipt: 5-8/4-23/4-14/4-9-09	
	6. Vendor Name & Address:	
	Old City Hall	k Here for Memo Itemization
	814 Saginaw St	
Fund Raiser Contribution	Bay City MI 48708	
	· □ - · · · · · · · · · · · · · · · · ·	
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan	
	Goods Donated or Loaned Services Donated	7.96 \$
Same	Goods or Services Purchased by Candidate or Others	T.30
	Goods or Services Purchased by Candidate or Others- LOAN	
16 0400 00	Description Food refreshments w/legislators	
If over \$100.00 cumulative, please provide: Occupation:	•	
Employer Name & Address:	5. Date Of Receipt: 04/21/09	
Employer Name a rearest	6. Vendor Name & Address:	
	The Exchange Clie	ck Here for Memo Itemization
	314 E Michigan Ave	
	Lansing MI 48933	
Fund Raiser Contribution		
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	7.50
Name & Address:	Goods Donated or Loaned Services Donated \$	7.50
Same	Goods or Services Purchased by Candidate or Others	
	Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide:	Description Refreshments - constituents	
Occupation:	5. Date Of Receipt: 03/16/10	
Employer Name & Address:	6. Vendor Name & Address:	-t- Have for Marco Itamiration
	Old City Hall	ck Here for Memo Itemization
	814 Saginaw St	
	Bay City MI 48708	
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Page 5 of 11



**SCHEDULE 1-IK** 

1. Committee I. D. Number 14074

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3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value 8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? Yes Name & Address:  Same	Goods or Services Purchased by Candidate or Others	85.00 <sub>\$</sub>
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:  Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others- LOAN Description Food, refreshments Traxler  5. Date Of Receipt: 07/12/09  6. Vendor Name & Address: Grand Hotel PO Box 286 Mackinac Island MI 49757	ck Here for Memo Itemization
Contribution # 2 PAC Receipt? Yes Name & Address  Same  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	8.00 \$
Fund Raiser Contribution	Oudaha Dana	k Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	.07
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Lunch w/constituent  5. Date Of Receipt: 07/17/09  6. Vendor Name & Address:	k Here for Memo Itemization
Fund Raiser Contribution	Page Subtotal	\$159.07
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	Enter this total

Page 6 of 1)



#### **SCHEDULE 1-IK**

1. Committee I. D. Number 14074

#### CANDIDATE COMMITTEE

Same	ONINDAIL OUNIN				
Name & Address:  Goods or Services Purchased by Candidate or Others Goods Or Services Purchased by Candidate	name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).	<ul><li>5. Date of Receipt</li><li>6. Name &amp; Address of Vendor from whom goods or services v</li></ul>	vere	Fair Market	8. Cumulative for Election Cycle (Through date in Item 5)
Found Raiser Contribution   Description   Lunch McCabe, Loch	Name & Address:	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	Ψ	10.78	\$
Name & Address Same  Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others LOAN    Fover \$100.00 cumulative, please provide:   Occupation:     Employer Name & Address:	Occupation: Employer Name & Business Address:	Description Lunch McCabe, Loch  5. Date Of Receipt: 01/13/09  6. Vendor Name & Address:  Riverfront Grille  1 Wenonah Pk Pl		ck Here for Memo	l Itemization
Source Description  Fund Raiser Contribution  Contribution #3 PAC Receipt? Yes Name & Address:  Goods Donated or Loaned Services Donated Services Purchased by Candidate or Others  Goods or Services Purchased by Candidate or Others  Cick Here for Memo Itemization  Description Membership  Source of Dem Women & Men 2341 E Beaver Rd  Kawkawlin MI 48631  Fund Raiser Contribution  Page Subtotal  \$30.78	Name & Address Same	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others  Goods or Services Purchased by Candidate or Others- LC		0.00	\$
Contribution #3 PAC Receipt? Yes 4. Endorsement or Guarantee of Bank Loan Name & Address:  Same  Goods Donated or Loaned Services Donated 10.00  Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN  Membership  5. Date Of Receipt: 07/15/09  6. Vendor Name & Address: League of Dem Women & Men 2341 E Beaver Rd Kawkawlin MI 48631  Fund Raiser Contribution  Page Subtotal \$30.78  Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	Occupation:	5. Date Of Receipt: 05/20/09 6. Vendor Name & Address: Taxi Service	— Clic	k Here for Memo	Itemization
Name & Address:  Same  Goods Donated or Loaned Services Donated \$10.00 \$  Goods or Services Purchased by Candidate or Others  Goods or Services Purchased by Candidate or Others-LOAN  If over \$100.00 cumulative, please provide:  Occupation:  Employer Name & Address:  Description Membership  5. Date Of Receipt:  6. Vendor Name & Address:  League of Dern Women & Men 2341 E Beaver Rd Kawkawlin MI 48631  Fund Raiser Contribution  Page Subtotal  Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	Fund Raiser Contribution				
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:  5. Date Of Receipt: 07/15/09  6. Vendor Name & Address: League of Dem Women & Men 2341 E Beaver Rd Kawkawlin MI 48631  Fund Raiser Contribution  Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	Name & Address:	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	Ψ	.00	\$
Fund Raiser Contribution  Page Subtotal  Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	Occupation:	Description Membership  5. Date Of Receipt: 07/15/09  6. Vendor Name & Address:  League of Dem Women & Men		k Here for Memo	Itemization
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	Fund Raiser Contribution	Kawkawlin MI 48631			
(Complete on last page of Schedule)		-	-	\$30.78	
Ettel tills (Mai				Enter this total	_

on line 6 of Summary Page



SCHEDULE 1-IK

1. Committee I. D. Number 14074

SCHEDULE I-II		_
CANDIDATE COM	AITTEE 2. Committee Name Tom Hickner for	County Executive
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value 8. Cumulative for Election Cycle (Throug date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Same	4.	15.00 \$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Description Membership  5. Date Of Receipt: 07/29/09	
□	6. Vendor Name & Address:	ick Here for Memo Itemization
Fund Raiser Contribution  Contribution # 2 PAC Receipt? Yes  Name & Address  Same  If over \$100.00 cumulative, please provide:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	30.00
Occupation: Employer Name & Address:	5. Date Of Receipt: 08/12/09 6. Vendor Name & Address:  MSU Alumni Club 1120 N Water	ck Here for Memo Itemization
Fund Raiser Contribution	Bay City MI 48708	
Contribution #3 PAC Receipt? Yes Name & Address:	4.	2.00
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Refreshments - Legislators  5. Date Of Receipt: 06/12/09  6. Vendor Name & Address:	ck Here for Memo Itemization
Fund Raiser Contribution		
	Page Subtotal	\$77.00

Enter this total on line 6 of Summary Page

Grand Total of all Schedules 1-IK (Complete on last page of Schedule)



**SCHEDULE 1-IK** 

1. Committee I. D. Number 14074

#### **CANDIDATE COMMITTEE**

OANDIDA L COM				· · · · · · · · · · · · · · · · · · ·
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services appurchased	were	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Same	4.	s_ <u></u>	24.25	\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:  Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others- LC  Description Refreshments - union folks, coal  5. Date Of Receipt: 05/17/09  6. Vendor Name & Address:  Bay Valley 2470 Old Bridge Rd Bay City MI 48706	·	sk Here for Memo	) Itemization
Contribution # 2 PAC Receipt? Yes Name & Address  Same  If over \$100.00 cumulative, please provide:	4.  Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-Loanescription FUNDRAISER dinner		0.00	\$
Occupation: Employer Name & Address:  Fund Raiser Contribution	5. Date Of Receipt: 09/09/09 6. Vendor Name & Address: Lions Club 519 S Farragut Bay City MI 48708	Clic	k Here for Memo	Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  Same	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LO	<b>-</b>	0.00	\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description FUNDRAISER dinner  5. Date Of Receipt: 09/09/09  6. Vendor Name & Address:  St George Society 1401 S Grant Bay City MI 48708	<del></del>	k Here for Memo	Itemization
Fund Raiser Contribution				
	Page Su Grand Total of all Schedule (Complete on last page of Sch	es 1-lK	\$174.25  Enter this total	

on line 6 of Summary Page

Page 9 of \_\_\_\_\_



SCHEDULE 1-IK

1. Committee I. D. Number 14074

CANDIDATE COMM	AITTEE 2. Committee Name Tom Hickner for	County Executive
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market For Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address:  Same	Goods or Services Purchased by Candidate or Others	50.00 \$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	✓ Goods or Services Purchased by Candidate or Others- LOAN  Description FUNDRAISER DINNER  5. Date Of Receipt: 11/03/09  6. Vendor Name & Address:	
Fund Raiser Contribution	919 Boutell Place Bay City MI 48708	lick Here for Memo Itemization
Contribution #2 PAC Receipt? Yes Name & Address  Same	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN	75.00 s
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description FUNDRAISER dinner  5. Date Of Receipt: 10/15/09  6. Vendor Name & Address:  Rotary International CPO Box 42  Bay City MI 48707	lick Here for Memo Itemization
Fund Raiser Contribution  Contribution #3 PAC Receipt? Yes Name & Address:  Same	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 2 ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN	2.56 \$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Fund Raiser Contribution	Description Refreshments - volunteers  5. Date Of Receipt: 10/27/09  6. Vendor Name & Address:  Old City Hall 814 Saginaw St Bay City MI 48708	lick Here for Memo Itemization
	Page Subtota	Ψ1-7.50
	Grand Total of all Schedules 1-l (Complete on last page of Schedule	

Enter this total on line 6 of Summary Page



**SCHEDULE 1-IK** 

1. Committee I. D. Number 14074

C.	Δ	ħ	ID	ID	Α	T	Έ	C	OI	И	ħ	4	'n	ГТ	F	E

	<del></del>	
Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     Name & Address of Vendor from whom goods or services were	7. Amount or Fair Market Solution Cycle (Through date in Item 5)
Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	purchased	date in tem 5)
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	**************************************
Name & Address:	Goods Donated or Loaned Services Donated	46.28
Same	Goods or Services Purchased by Candidate or Others	<u> </u>
	Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide: Occupation:	Description Refreshments - Eleanor, AFL	
Employer Name & Business Address:	5. Date Of Receipt: 09/14/09	
	6. Vendor Name & Address:	
	Soaring Eagle Mt Pleasant MI 48858	ck Here for Memo Itemization
Fund Raiser Contribution		
Contribution # 2 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address	Goods Donated or Loaned Services Donated	
Same		\$5.00
	Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide:	Description FUNDRAISER dinner	
Occupation:	5. Date Of Receipt: 10/19/09	
Employer Name & Address:	6. Vendor Name & Address:	
	•	ck Here for Memo Itemization
	1900 Columbus Ave	
Fund Raiser Contribution	Bay City MI 48708	
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address:	Goods Donated or Loaned Services Donated \$8.5	80 <sub>\$</sub>
Same	Goods or Services Purchased by Candidate or Others	
	Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide:	Description stamps	
Occupation:	5. Date Of Receipt: 10/13/09	
Employer Name & Address:	6. Vendor Name & Address:	
	Postmaster	ck Here for Memo Itemization
	1000 Washington Ave	
<b>-</b>	Bay City MI 48707	
Fund Raiser Contribution		<b>1</b>
	Page Subtotal	\$90.08
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$1,849.76
	(Somplete on fact page of Octobraile)	<u> </u>

Enter this total on line 6 of Summary Page



## SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

14074

2. Committee Name Tom Hickner for County Executive

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Postmaster		02/10/09	04.00
Address	Purpose: Box rent	Date	\$ 21.00
1000 Washington Ave	Purpose:		
Bay City MI 48707	Click H	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2	Statement	-	
Name Staples		02/21/09	s 66 <i>.</i> 21
Address	Purpose: Labels & envelopes	Date	
4021 N Euclid Ave	Click H	lere for Memo	Itemization Type
Bay City MI 48706			,,
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name POSTMASTER		03/02/09	\$ 108.36
Address	Purpose: Stamps & postage due	Date	\$ <u>100.30</u>
1000 Washington Ave	Click LI	oro for Mama i	temization Type
Bay City MI 48707	Check box if this expenditure is payment of	ere for Merrio	ternization Type
▼ Fund Raiser	debt or obligation reported on previous		
Expenditure #4			
Name Mail Room		03/09/90	
Address	Purpose: Bulk mailing for FR	Date	\$ 388.82
3075 Shattuck			
Saginaw MI 48603	Click He	ere for Memo I	temization Type
▼ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			· · · · · · · · · · · · · · · · · · ·
Name Stein Haus		03/13/09	
Address	Purpose: Fund raiser food & bev	Date	\$ <u>1354.95</u>
1020 N Water St			
Bay City MI 48708	Click He Check box if this expenditure is payment of	ere for Memo I	temization Type
✓ Fund Raiser	debt or obligation reported on previous statement		
	Subtota	al this page	\$1,939.34
	Grand Total of all So		
	(Complete on last page	or ocriedille) [	Enter this total

Enter this total on line 8a of Summary Page

1 of 2



## ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

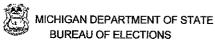
14074

2. Committee Name Tom Hickner for County Executive

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Bay City Democratic Press		03/12/09	\$ 214.12
Address	Purpose: Tickets & envelopes	Date	<b>⊅</b> <u>∠17.1∠</u>
PO Box 278			
Bay City MI 48707	,		Itemization Type
√Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2		<del></del>	
Name Cherry for Governor		06/19/09	s 500.00
Address	Purpose: Fundraiser	Date	-
PO Box 18189	Click I	Jere for Memo	Itemization Type
Lansing MI 48915		TOTO TOT INICINIO	itemization rype
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Postmaster		08/04/09	\$ 22.00
Address	Purpose: Box rent	Date	Ψ <u>~~</u>
1000 Washington Ave	·· <del>··</del>		
Bay City Mi 48707		lere for Memo I	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name			
Address	Purpose:	Date	\$
	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of		<b>,</b>
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click H	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	•	
		al this page	
	Gubiqu	ai uns page	\$736.12
	Grand Total of all S (Complete on last page		\$2,675.46

Enter this total on line 8a of Summary Page

Page 2 of 2



1. Committee I. D. Number 1407

40	74	

(For use by officeholders only)

2. Committee Name

Tom Hickner for County Executive

3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose		· · · · · · · · · · · · · · · · · · ·
Tom Hickner	Re-imbursement	01/29/09	<sub>\$</sub> 524.28
4821 E Westgate		Date	\$024.20
Bay City MI 48706	Ā	lemo Itemization E	Relow
Bay City Wil 40700	•	nemo nemizadon L	Delow
	Disbursement Code		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		
Old City Hall	Christmas party staff & workers	01/30/09	<sub>\$</sub> (416.46)
814 Saginaw St		Date	
Bay City MI 48708			
10.00	A)	demo Itemization)	
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO		
reported on previous statement	Fund Raiser		
Disbursement # 3	Purpose		
Name & Address:	Refreshments Obama party volunteers	01/20/09	<sub>s</sub> (107.82)
Old City Hall		Date	<u> </u>
814 Saginaw St			
Bay City MI 48706	Cl	ick for Memo Itemi	zation Type
	Dishuraamant Cada FO		
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO		
reported on previous statement	Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:	Ad	02/10/09	£40.00
Nat'l Assoc of Physically Handicapped	7.0	Date	\$10.00
2963 Meadowberry Ct	OII		
Bay City MI 48706	ÇII	ck for Memo Itemi	zation Type
Check box if this disbursement is payment of debt or obligation	Disbursement Code KO		
reported on previous statement	Fund Raiser		
	Cul.	htotal this page 1	
	Su	btotal this page	5564.28
	Grand Total of al (Complete on last pag	I Schedules 1C	
	(complete on that pay	· •	Enter this total

Enter this total on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES



1. Committee I. D. Number 14072

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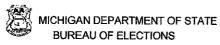
(For use by officeholders only)

Tom Hickner for County Executive

3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose		<u>L</u>
Friends of Celtic Culture	Donation	02/10/10	\$ <u>100.00</u>
1204 Leng St		Date	
Bay City MI 48706		Click for Memo Iter	nization Type
	Disbursement Code KO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		400.00
Walling for Mayor PO Box 937	FUNDRAISER	03/11/09 Date	<u>\$100.00</u>
Flint MI 48501		Click for Memo Item	nization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code IO  Fund Raiser		
Disbursement #3 Name & Address:	Purpose		·
Bay City Democratic Press	Tkt printing UAW 362	04/23/09	<sub>\$</sub> 45.58
PO Box 278		Date	
Bay City MI 48707		Click for Memo Item	ization Type
Check box if this disbursement is payment of debt or obligation	Disbursement Code KO		
reported on previous statement	Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:	Caucus	04/23/09	<sub>\$</sub> 250.00
MI House Democratic Fund PO Box 16193		Date	
Lansing MI 48901		Click for Memo Itemi	ization Type
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO		
reported on previous statement	Fund Raiser		
		Subtotal this page	\$495.58
	Grand Total (Complete on las	of all Schedules 1C st page of Schedule)	
		_	Enter this total

on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES



1. Committee I. D. Number \_

14074	1	40	74	
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(For use by officeholders only)

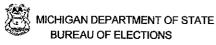
2. Committee Name

Tom Hickner for County Executive

3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose		
Bay County Democratic Party	Printing of tickets	04/23/09 Date	<sub>\$</sub> 50.00
2341 Beaver Rd			
Kawkawlin MI 48631		Click for Memo Iter	nization Type
l —	Disbursement Code K0		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2   Name & Address:	Purpose		
Tom Hickner	Re-imbursement	06/23/09	<sub>\$</sub> 629.24
2821 E Westgate		Date	
Bay City MI 48706			
		Memo Itemization B	Selow
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
Disbursement # 3	Purpose		<del></del>
Name & Address:	FUNDRAISER	02/16/09	<sub>s</sub> (50.00)
Bay Arts Council		Date	<u> </u>
915 Washington Ave			
Bay City MI 48708		(Memo Itemization)	
	Disbursement Code 10		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
	T und I taiser		
Disbursement # 4 Name & Address:	Purpose		
	FUNDRAISER	05/01/09	(35.00)
Pinconning Mayor's Scholarship		Date	
PO Box 556		(Memo Itemization)	
Pinconning MI 48650			
Charle have if this all all and a second sec	Disbursement Code (O		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
	T unu reaser		
		Subtotal this page	679.24
	Grand Total (Complete on las	of all Schedules 1C t page of Schedule)	
			Enter this total

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\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES



1. Committee I. D. Number \_

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(For use by officeholders only)

2. Committee Nam

Tom Hickner for County Executive

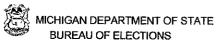
3. Name and address of person to whom disbursement was made	4. Description of Disbursement	5. Date	6. Amount of
	(Be specific & you may assign a disbursement code*)		Disbursement
Disbursement # 1 Name & Address:	Purpose		
Postmaster	stamps	05/01/09	<sub>\$</sub> (25.40)
1000 Washington Ave		Date	
Bay City MI 48707		(Memo Itemization)	
lm	Disbursement Code 80		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		
Summit Printing	printing Spring Fling	05/01/09	<sub>\$</sub> (1.87)
205 4th St		Date	
Bay City MI 48708		(Memo Itemization)	
		(oo Komazason)	
n	Disbursement Code KO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 3	Purpose		
Name & Address:	Fundraiser Spring Fling	05/01/09	<sub>s</sub> (100.00)
Bay Co Dem Party	1 dildiaiser opinig i mig	<u>03/01/09</u>	\$ 100.00)
2341 Beaver Rd			
Kawkawlin MI 48631		(Memo Itemization)	
	Disbursement Code 10		
L_l Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 4	Rumana		
Name & Address:	Purpose	0.4/0.0/0.0	(20 60)
Atrium	Lunch Shore & Lipinski	04/09/09 Date	<u>(30.60)</u>
1108 N Water St			:
Bay City MI 48708		(Memo Itemization)	
	D		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>FO</u> Fund Raiser		
	Lunu raisei		
		Subtotal this page \$	0.00
	Grand Total (Complete on las	of all Schedules 1C t page of Schedule)	
	, , , , , , , , , , , , , , , , , , , ,	· '-	Enter this total

Enter this total on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

Page 4 of 12



1. Committee I. D. Number \_

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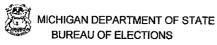
(For use by officeholders only)

2. Committee Name \_\_\_\_ Tom Hickner for County Executive

Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a     disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1	Purpose	<u>I</u>	
Name & Address:			
SBYC	FUND RAISER	05/22/09	<sub>\$</sub> (50.00)
PO Box 45		Date	
Bay City MI 48707		(Memo Itemization)	
		(**************************************	
	Disbursement Code 10		
Check box if this disbursement is payment of debt or obligation	Fund Raiser		
reported on previous statement	rund Raiser		
Disbursement # 2 Name & Address:	Purpose		
	Coal plant hearing	04/15/09	<sub>s</sub> (24.25)
Bay Valley	Coar plant nearing		\$ <u>(= 11=0)</u>
2470 Old Bridge Rd		Date	
Bay City MI 48706		/B.4	
-		(Memo Itemization)	
Check how if this dishumement is a surrout of dalls as a bit of	Disbursement Code FO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 3 Name & Address:	Purpose		
	Refreshments - dev group	06/18/09	<sub>s</sub> (21.00)
Old City Hall		Date	¥
814 Saginaw St			
Bay City MI 48708		(Memo Itemization)	
		(MCITIO ITERITIZATION)	
	Disbursement Code FO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		i
reported on previous statement	rund Kaiser		
Disbursement # 4	Purpose		
Name & Address:	Staff dinner & refreshments	06/12/09	<b>(148.56)</b>
Old City Hall	otan diffier & refreshiftents		\$ 140.50)
814 Saginaw St		Date	
Bay City MI 48708		(Memo Itemization)	
Day City Wil 40700			
<b>,</b>			
Check box if this disbursement is payment of debt or obligation	Disbursement Code <u>FO</u>		
reported on previous statement	Fund Raiser		
	•	Subtotal this page \$	0.00
	Grand Total o	f all Schedules 1C	
	(Complete on last	f all Schedules 1C page of Schedule)	
		ı	nter this total

on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES



1. Committee I. D. Number 14074

Tom Hickner for County Executive

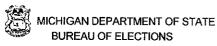
(For use by officeriorders offiy)			·
Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a     disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1	Purpose	5.8.09	****
Name & Address:	Snacks & refreshments	4-23-09	(0.4.00)
Old City Hall	Shacks & reneshments	4-9-09	<u>\$(94.60)</u>
814 Saginaw St		Date	
Bay City MI 48708		(Memo Itemization)	
Check box if this disbursement is payment of debt or obligation reported on previous statement  Disbursement # 2 Name & Address:	Disbursement Code FO Fund Raiser  Purpose Food, refreshments w/legislators	0.4/0.4/0.0	<sub>s</sub> (47.96)
The Exchange	1 ood, tellestillerits whegistators		\$(41.00)
314 E Michigan Ave		Date	
Lansing MI 48933			
3		(Memo Itemization)	
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code FO Fund Raiser		
Disbursement # 3 Name & Address:	Purpose		<del></del> -
	Charity golf fund raiser	09/22/90	<sub>\$</sub> 50.00
BCEA		Date	Ψ
509 S Euclid Ave			
Bay City MI 48706	,	Click for Memo Itemi:	rotion Tuno
		onek for Metrio Reffig	zadon i ype
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code 10		
Disbursement # 4	Purpose		-
Name & Address:	Re-imbursement	00/45/00	<sub>\$</sub> 308.60
Tom Hickner	ive-impursement	08/15/09	\$00.00
4821 E Westgate		Date	
Bay City MI 48706	1	vierno Iternization Be	low
Bay Ony IVIT 40700			
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeFund Raiser		
	S	Subtotal this page	358.60
	Grand Total of	all Schedules 1C	
	(Complete on last p	age of Schedule)	***************************************
		ł	Enter this total

on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

Page 6 of 12



1. Committee I. D. Number

14074			
	 	<del></del>	-

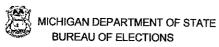
(For use by officeholders only)

2. Committee Name \_\_\_\_\_ Hickner for County Executive

Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose	3/16/09	——————————————————————————————————————
Old City Hall	refreshments constituents	7/21/09	<sub>s</sub> (17.50)
814 Saginaw St		Date	*
Bay City MI 48708		(Memo Itemization)	
 	Disbursement Code FO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		
Grand Hotel	Food, refreshments - Traxler	07/12/09	<sub>\$</sub> (85.00)
PO Box 286		Date	
Mackinac Island MI 49757	,		
	(	Memo Itemization)	
[]	Distriction of Co. 1. EO.		
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO Fund Raiser		
reported on previous statement			
Disbursement # 3 Name & Address:	Purpose		(## OO)
Cudahy Room	Food, refreshments -Traxler	07/10/09	<u>\$(5<b>%</b>.00)</u>
Mackinac Island MI 49757		Date	İ
•	(I	Memo Itemization)	
	,	nome nomination,	
	Dishumamant Cada FO		
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO		
reported on previous statement	Fund Raiser		
Disbursement # 4 Name & Address:	Purpose		
	Lunch w/constituents	07/17/09	<sub>\$</sub> (16.07)
Waterfront Mkt & Deli 925 N Water		Date	
Bay City MI 48708	1)	Memo Itemization)	
Bay ony Wil Horoco			
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO		
reported on previous statement	Fund Raiser		
	Se	ubtotal this page	60.00
	Grand Total of a (Complete on last pa	all Schedules 1C	
	(550) pisto stribot pr	/	Enter this total

on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES



I. Committee I.	D.	Num	ľ

14074	
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(For use by officeholders only)

2. Committee Nam

Tom Hickner for County Executive

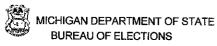
Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a	5. Date	6. Amount of Disbursement
Disbursement # 1	disbursement code*)  Purpose		Dispuisement
Name & Address: Riverfront Grille	Lunch - McCabe, Loch	01/13/09	<sub>\$</sub> (10.78)
1 Wenonah Pk Pl		Date	· · · · · · · · · · · · · · · · · · ·
Bay City MI 48708		(Memo Itemization)	l
 	Disbursement Code FO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		
Taxi Company	Transportation	05/20/09	<u>\$(10.00)</u>
Mackinac Island MI		Date	
		(Memo Itemization)	
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code FO Fund Raiser		
Disbursement # 3	Purpose		····
Name & Address:	Membership	07/15/09	<sub>\$</sub> (10.00)
League of Dem Women & Men 2341 E Beaver Rd	***	Date	
Kawkawlin MI 48631		(Memo Itemization)	
П.,	Disbursement Code _AO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:	Membership	07/29/09	<sub>\$</sub> (15.00)
St George Society 1401 S Grant	- 000	Date	-
Bay City MI 48708		(Memo Itemization)	
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code GO Fund Raiser		
	· · · · · · · · · · · · · · · · · · ·	Subtotal this page	0.00
	Grand Total (Complete on las	of all Schedules 1C st page of Schedule)	<u> </u>
· ·		_	Enter this total

Enter this total on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

Page 8 of 12



1. Committee I. D. Number 14074

(For use by officeholders only)

Tom Hickner for County Executive

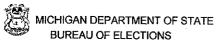
3. Name and address of person to whom disbursement was made	4. Description of Disbursement	5. Date	6. Amount of
	(Be specific & you may assign a disbursement code*)	J. Date	Disbursement
Disbursement # 1 Name & Address:	Purpose		71/
MSU Alumni Club	Fundraiser cruise 1 ticket	08/12/09	\$(30.00)
1120 N Water		Date	
Bay City MI 48708		(Memo Itemization)	)
	Disbursement Code IO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		(00.00)
The Exchange	Refreshments - legislators	06/12/09	<u>\$(32.00)</u>
314 E Michigan		Date	
Lansing MI 48933	(	Memo Itemization)	
	ro		
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO		
reported on previous statement	Fund Raiser		
Disbursement # 3 Name & Address:	Purpose		(0 ( 0 =)
Bay Valley	Refreshments - union folks, coa	<del></del>	<u>\$(24.25)</u>
2470 Old Bridge Rd		Date	
Bay City MI 48706	(	Memo Itemization)	
Charle have lift this dishuman and is a surrout of date (see blind)	Disbursement Code FO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:	Re-imbursement	12/14/09	<sub>\$</sub> 387.64
Tom Hickner		Date	
4821 E Westgate Bay City MI 48706	N	temo Itemization B	elow
Bay City Wil 48700			
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
	S	ubtotal this page	\$387.64
	Grand Total of a (Complete on last page)	all Schedules 1C age of Schedule)	
		••	Enter this total

on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

Page 9 of 12



## INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C

**CANDIDATE COMMITTEE** 

1. Committee I. D. Number	

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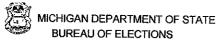
(For use by officeholders only) 2. Committee

Tom Hickner for County Executive

3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Lions Club 519 S Farragut Bay City Mi 48708	Purpose FUNDRAISER DINNER	09/09/09  Date (Memo Itemization)	\$(50.00)
Check box if this disbursement is payment of debt or obligation reported on previous statement  Disbursement # 2 Name & Address:  St George Society	Disbursement Code IO Fund Raiser  Purpose FUNDRAISER DINNER	09/09/09	<sub>\$</sub> (100.00)
1401 S Grant Bay City MI 48708		Date (Memo Itemization)	
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code IO Fund Raiser		
Disbursement # 3 Name & Address:  Bay Area Community Foundation 919 Boutell Place Bay City MI 48708	Purpose FUNDRAISER DINNER	11/03/09 Date  (Memo Itemization)	<u>s(50.00)</u>
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code IO Fund Raiser		
Disbursement # 4 Name & Address:  Rotary International PO Box 42 Bay City MI 48707	Purpose FUNDRAISER DINNER	10/15/09 Date (Memo Itemization)	<sub>\$</sub> (75.00)
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code IO Fund Raiser		
	Grand Total (Complete on las	of all Schedules 1C st page of Schedule)	0.00

Enter this total on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES



1. Committee I. D. Number 14074

(For use by officeholders only)

Tom Hickner for County Executive

3. Name and address of person to whom disbursement was made	4. Description of Disbursement	5. Date	6. Amount of
	(Be specific & you may assign a disbursement code*)	J. Date	Disbursement
Disbursement # 1 Name & Address:	Purpose		<del></del>
Old City Hall	Refreshments - volunteers	10/27/09	<sub>\$</sub> (22.56)
814 Saginaw St		Date	\$(22.00)
Bay City MI 48708		(Memo Itemization)	
		,	
	Disbursement Code FO		
Check box if this disbursement is payment of debt or obligation			
reported on previous statement	Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		
Soaring Eagle	Refreshments - Eleanor, AFL	09/14/09	<sub>\$</sub> (46.28)
Mount Pleasant MI 48858		Date	
		/Marra Harrimatian)	
		(Memo Itemization)	
 	D		
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO Fund Raiser		
reported on previous statement	rund Kaisei		
Disbursement # 3 Name & Address:	Purpose		-
Bay Med Foundation	FUNDRAISER DINNER	10/19/09	<sub>\$</sub> (35.00)
1900 Columbus Ave		Date	
Bay City MI 48708			
•		(Memo Itemization)	
_			
Check box if this disbursement is payment of debt or obligation	Disbursement Code FO		
reported on previous statement	Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:	Stamps	10/13/09	(8.8 <sub>k</sub>
Postmaster	Otampo		\$0.00)
1000 Washington Ave		(Memo Itemization)	
Bay City MI 48707		(Weine Reinzauen)	
	<b>DO</b>		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code BO		
opposed on provided statement	Fund Raiser		
		Subtotal this page \$	0.00
	Grand Total of	of all Schedules 1C page of Schedule)	
	(Complete on last	· <del></del>	Enter this total

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\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES



### INCIDENTAL OFFICE EXPENSE DISBURSEMENTS **SCHEDULE 1C**

CANDIDATE COMMITTEE

1. Committee I. D. Number 14074

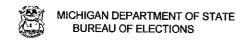
Tom Hickner for County Executive 2. Committee Name (For use by officeholders only) 3. Name and address of person to whom disbursement was made 4. Description of Disbursement 5. Date 6. Amount of (Be specific & you may assign a Disbursement disbursement code\*) Disbursement # 1 **Purpose** Name & Address: Deposit stamp, postage due 12/20/09 Marie Hayes <sub>\$</sub>28.22 114 N Sheridan Bay City MI 48708 Click for Memo Itemization Type Disbursement Code BO Check box if this disbursement is payment of debt or obligation Fund Raiser reported on previous statement Disbursement # 2 Purpose Name & Address: Date Click for Memo Itemization Type Disbursement Code Check box if this disbursement is payment of debt or obligation Fund Raiser reported on previous statement Disbursement # 3 Purpose Name & Address: Date Click for Memo Itemization Type Disbursement Code Check box if this disbursement is payment of debt or obligation reported on previous statement Fund Raiser Disbursement # 4 Purpose Name & Address: Date Click for Memo Itemization Type Disbursement Code Check box if this disbursement is payment of debt or obligation reported on previous statement Fund Raiser Subtotal this page \$28.22

> Enter this total on line 10a of Summary Page

\$2,513.56

Grand Total of all Schedules 1C (Complete on last page of Schedule)

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES



#### **FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE**

14074 1. Committee I.D. Number

Tom Hickner for County Executive

		2. COI	nmittee Name 101111101011	or lor County Executive
	- USE A	SEPARATE SH	EET FOR EACH EVE	NT -
3. Date Event Was Held	or Participati	Individuals Attending ng (whichever is	5. Type of Fund Raising Activi	6. Address and Name (If any) of place where the activity was held
03/12/09	greater)	152	COCKTAIL PARTY	Stein Haus 1108 N Water St. Bay City MI 48708 Private Residence
7. Total Contributions	9	\$5,505.00		
8. Other Receipts	9	0.00		
9. Gross Receipts (Add lines 7	and 8)	5,505.00		
10. Total Cost of Event (Total Cost includes In-Kind Co		2,066.25 nd All Expenditures	Made For the Event)	
11. Check if event was a jo	int fund raise	er and complete the	following:	
Co-Sponsor(s)		Contribution S (%)	plit	Expenditure Split (%)
	-			
	•	<del></del>		14444
			<del></del>	
***************************************	•	<u> </u>		**************************************
	,			
Receipts and expenditure Schedule (1A), Itemized Summary Page.	ampaign Sta res listed on In-Kind Cor	itement. a Fund Raiser Sch itributions Scheduk	edule must also be reporte	raising event held during the ed on the Itemized Contributions ures Schedule (1B) and the edule for the event.